v) making full impact of the Reproductive and Child Health Programme which is in the 4th year *i.e.* the peak year of its implementation.

vi) to provide matching grants for externally aided projects.

Setting up of National Monitoring Committee on Pre-Natal Tests

1395. SHRI C. RAMACHANDRAIAH: Will me MINISTEROF HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government propose to set up a National Monitoring Committee on Pre-Natal Tests;

(b) if so, the objectives thereof; and

(c) by when it is likely to be set up?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. C.P. THAKUR): (a) to (c) Government have set up a National Inspection and Monitoring Committee for ensuring compliance of the directions of the Supreme Court and for more effective implementation of the Pre-Natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994 (PNDT Act) with the following terms of reference:-

(i) Visit vulnerable States-Districts as per the directions of the Central Supervisory Board and submit its report to the Board.

(ii) Inspection and monitoring of Information, Education & Communication (IEC) and social awareness activities being conducted in States and UTs. for implementation of the PNDT Act.

(iii) Inspection and monitoring of surveys of Genetic Clinics, Genetic Counselling centres, Genetic Laboratories and other bodies using
- ultrasound machine capable of detecting sex of foetus or pre-conception selection of sex from the level of Sub-District upwards in all States/ UTs.

(iv) Inspection and monitoring of registration of genetic Clinics, Genetic Counselling Centres, Genetic Laboratories and other bodies using ultrasound machine capable of detecting sex of foetus or pre-conception selection of sex with the Appropriate Authorities at the level of sub-district upwards.

(v) Monitoring of prosecutions launched against un-registered bodies and bodies violating provisions of the PNDT Act/Rules and Orders of Supreme Court.

(vi) Monitoring of compliance of Supreme Court Orders.

Separate National Policy for ISM & H

1396. SHRI ABANl ROY: Will the MINISTER OF HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have finally decided to formulate a separate National Policy for ISM &H;

(b) if so, whether the draft of the National Policy iias been sent to various Ministries for their comments;

(c) if so, whether the existing efforts made by Government to promote ISM&H have been found to be ineffective; and

(d) if so, the extent to which this formulation of separate National Policy for ISM&H is going to widen its use?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. C.P. THAKUR): (a) A Policy on Indian Systems of Medicine has been drafted.

(b) Yes, Sir.

(c) and (d) The existing efforts have proved encouraging. However, the proposed National Policy builds upon the positive features of the indigenous systems of Indian Medicine as also Homoeopathy, while focussing on the immense opportunities that lie ahead. The Policy seeks to maximize these opportunities by recommending a range of strategies.

These are:-

(1) To strengthen the euducation and research infrastructure of ISM&H.

(2) To encourge the development of the medicinal plants sector.

(3) To foster integration of the ISM&H sector in the national health care delivery system.

(4) To enforce Good Manufacturing practices (GMP).

(5) To provide adequate at Central and State level.

(6) To encourage and nurture the ISM&H industry.